Juvenile Justice Advisory Council

Iowa Department of Human Rights
Division of Criminal and Juvenile Justice Planning

Request for Consideration

| Date: | |
|---|---------------------|
| Applicant(s): | |
| Project / Travel: | |
| Estimated Cost (include travel cost per person – airfare/mileage, lodging, meals, registration etc.): | |
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| Projected Timeline: | |
| Project Description / | Travel Explanation: |
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| Desired Outcomes/Ex | rnostations: |
| Desired Outcomes/Ex | epectations. |
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| Please attach additional materials as needed. | |